INSPECTION PACKAGE - COVER PAGE

	-			
Facility Name Berkshire Power LLC		FMF#_	27442	
Street Address 36 Moylan Lane			or R. Win	Debera
Town Agawam Zip 01001			ate June	
"Is it all there?" C Yellow FMF Form to Robbie 6/27/63 (date) Pre-FMF Printout to Robbie 6/27/63 (date)	CHEC:	SEIS Printout (Air	r Pollution) G Checklist (TSDF:	· Trantment
Pre-FMF Printout for Insp. Pkg		Storage, or Dispos		: Heatment,
GIS Map to Robbie(date)	,□	RCRA Inform For (for facilities in RC	rm (see J. Downes)	
FIRST Inspection Form			Application Cover	- Dane
☐ Stage II Inspec. Forms (Boston's and JV's)	_	if enforcement is r	required (see John K	Kirzec)
Inspection Summary/Report/Memo		Chemical Overvie Sheet, if LQTU	w Printout & Form	S Cover
☐ Sig. Violator Forms			-	
☐ Complaint Log Form/Telephone Memorandum				
☐ EO 350 Check, if state facility (see Rick Larson)				
SIC Code: 49 # of Employees: 19 Announced? Yes No Enforcement? Yes No Enf. Type: NON FNON ACO ACOP PAN EXPAN Other Enf. Prog. Area(s): AQ HW TWW TUR	DAT	Program AQ HW WO IWW	Pre-Insp. Status	Post-Insp. Status
Enf. Prog. Area(s): \square AQ \square HW \square IWW \square TUR		TUR		
CHAIN OF CUS Inspector → Supervisor → Section C FROM, TO DATE		→ Inspector → File		
PM Saadi 6/20/02 5M RW 6/27/02		FROM	TO	DATE

FIRST Compliance Evaluation Inspection Report

FACILITY NAME:	Berkshire Power, LLC				
FACILITY ADDRESS:	36 Moylan Lane, Aga	36 Moylan Lane, Agawam			
FACILITY CONTACT:	Frank Basile, General	l Manager			
DEP STAFF:	Robert Wineberg				
INSPECTION DATE:	June 5, 2002		CTION FORM June 24, 2002	FMF # 274425	
OBJECTIVE OF INSPECTION:	An announced multimedia inspection to determine compliance with the following BWP programs; AIR QUALITY, HAZARDOUS WASTE, INDUSTRIAL WASTEWATER, and TURA.				
COMPLIANCE ASSESSM found in):	MENT (According to th	ne guidelir	ne protocol, was any n	on-compliance	
Air Quality: Hazardous Waste: Industrial Wastewa TURA:	YE YE ter: YE	S 🗍 S 📋	NO X NO X NO X NO X		
Referral needed to a program:	other N/A				

A. ENFORCEMENT HISTORY:

Berkshire Power, LLC was issued a Notice of Noncompliance (NON) on April 2, 2002 for exceeding the permit limit for NOx on October 8 and 10, 2001. The exceedances were apparently the result of a tube leak in the HRSG and a malfunction of the ammonia control valve. Berkshire Power responded to the NON in writing on April 26, 2002. The response was determined to be satisfactory. The problems were corrected during a facility outage from October 13-18, 2001 and the facility has been in compliance since then.

B. BRIEF VIOLATION SUMMARY:

No violations were observed or recorded during this inspection.

C. BRIEF SOURCE REDUCTION SUMMARY:

No source reduction activities noted.

D. GENERAL FACILITY DESCRIPTION (VISUAL INSPECTION):

Berkshire Power, LLC operates a combined cycle independent power facility of approximately 272 MW, net nominal output. The facility consists of a combustion turbine with a nominal capacity of 172 MW and a heat input of 1792 MMBtu/hr at 59 degrees F, a heat recovery steam generator (HRSG) with no supplemental gas duct firing, a nominal 100 MW condensing steam turbine generator, a wet mechanical cooling tower, and ancillary equipment.

The hot gases exit the turbine and pass through a HRSG which is used to produce steam. The exhaust gases pass through the HRSG and are vented to atmosphere through a round, metal stack which stands 125 above ground level. Upstream of the stack the exhaust gases pass through an oxidation catalyst which is designed to control carbon monoxide (CO) emissions. In addition, oxides of nitrogen (NOx) emissions from the combustion turbine are controlled by the use of dry low NOx combustion technology. Additional NOx control is achieved through the use of a selective catalytic reduction (SCR) system which housed within the HRSG. NOx emissions from the combustion turbine and gas-fired chiller engines will also be controlled by the SCR system. Water injection and the SCR system will be used during oil firing which is permitted as a backup. To date, the unit has been fired exclusively on natural gas.

E. AIR QUALITY:

Berkshire Power, LLC maintains a continuous emission monitoring system (CEMS) for the following pollutants: CO, NOx, ammonia and opacity. Pursuant to the Department's Conditional Approval, dated October 26, 1999, Berkshire Power, LLC is required to conduct annual emissions tests for ammonia, particulate matter, volatile organic compounds and formaldehyde along with RATA tests for the CEMS. These tests were being done at the time of this inspection. The facility was operating at near full load (without chiller engines) for the RATA and part of the emissions tests. There were no visible emissions from the exhaust stack during this time. Please refer to the "Stack Test" file for test results and memoranda relative to emission compliance tests conducted at the facility during calendar years 2000 and 2001.

Frank Basile and I walked along the periphery of the plant and listened for sound emanating from the plant. During this time I noted that there are sound absorbing panels located along the base of the facility's cooling tower. In my opinion there were no sounds emanating from the facility that would generate a nuisance condition in the area.

F. HAZARDOUS WASTE:

Berkshire Power, LLC generates waste oil from the maintenance of plant equipment. The plant is listed as a VSQG for waste oil (#MV4137890075). The waste oil is stored properly, the drums are dated, and the waste oil is removed from the facility according to the appropriate time schedule.

G. INDUSTRIAL WASTEWATER:

Berkshire Power, LLC has obtained all required permits and approvals. Please refer to copies of the permits attached to this report.

H. TURA:

Berkshire Power is a TURA filer for sulfuric acid and sodium hydroxide which are used for boiler feed water treatment wastewater neutralization, respectively. See attached EPA Form R and MADEP Form S.



April 26, 2002

DEBP0035 File: 4116

Department of Environmental Protection Bureau of Waste Prevention 436 Dwight Street Springfield, MA 01103

Attention:

Mr. Saadi Motamedi

Compliance and Enforcement Chief

Subject:

Berkshire Power LLC

Enforcement Document No. NON-WE-02-7003

Dear Mr. Motamedi:

Berkshire Power LLC is providing this letter as specified in the Notice of Noncompliance dated April 2, 2002. This letter provides a detailed description of the sequence of events and corrective action taken with respect to reported NO_x excess emissions on October 8 and 10, 2001.

Berkshire Power experienced elevated NO_x readings following the startup on October 8th, which resulted in the 1-hour NO_x exceedance reported on this day. Initially, this elevated NO_x reading was thought to be the result of moisture carryover into the analyzer due to a tube leak in the heat recovery steam generator. The filters and dryers were replaced in the sample inlets to the CEMS analyzers. This seemed to correct the problem, as no further problems were experienced during this baseload run.

However, a similar occurrence of elevated NO_x levels was experienced following the startup on October 10th, also resulting in a reported 1-hour NO_x exceedance. The unit shut down for repair of the tube leak and a combustor inspection on October 12th. During this shutdown, the ammonia control valve was inspected and was found to have a misshapen feedback arm, which provided a false feedback indication in relation to the valve position. The arm was replaced and the valve was recalibrated.

The NOx exceedances on October 8th and 10th were a result of this misshapen feedback arm, which was discovered and repaired during the outage from October 12th - 18th.

Berkshire Power, LLC

DEBP0035 April 26, 2002 Page 2

We would like to note that there was one other reported 1-hour NOx exceedance in October, on October 19th. In our monthly report, this was reported to be due to an ammonia flow control problem. The problem that caused this exceedance was unrelated to the misshapen feedback arm. The October 19th exceedance was due to a problem with the ammonia trim feedback control loop for the SCR system, which caused a 1-hour exceedance due to low ammonia flow to the SCR. This problem was resolved during the outage that began on October 19th.

Berkshire Power will ensure in future monthly reports that a more thorough explanation of any excess emissions and associated corrective action is provided. Berkshire Power has been and continues to be committed to ensuring that emissions are maintained with permit limits at all times during operation, and that any problems that might be experienced are resolved as quickly as possible.

Please contact me at (413) 789-0075 if you have any questions.

Respectfully

Frank Basile General Manager

FMB:sms

n of Mass Department of Environmental . stection

PRE-INSPECTION ACTIVITY REPORT (PREINSACT.RDF Version 3.6 - 03-AUG-2000) BERKSHIRE POWER LLC Account Number: 274425 SIC 4911 Facility Information BERKSHIRE POWER LLC DEP Region: Primary SIC Code: 36 MOYLAN LANE Employees: TUR Survey Info Avail: Ν AGAWAM, MA 01001-0000 Ongoing Enforcement? Phone: 413-786-5640 SUBMITTED BY: **PCZAPIENSKI** Contact 1: Fac Start Date: 13-MAR-1996 **FACILITY** Class: COMMENTS Fac End Date Facility Regulated By (Includes ENDED r.o.s and classifications) Prg/Reg R.O. Acct R.O. Type R.O End Related ID's Classif. Qty Primary? Class End IWW-WE 274426 TYPE1 AQ-WE 299304 PLANT 0420067 A1-MAJ 1 N 28-SEP-1999 OP2 1 N 28-SEP-2000 OP7.5 1 Y 28-NOV-2001 OP5.5 1 N TUR-WE 335686 TURRPT 01001BRKSH36MYL LQTU 1 Y AQ-WE 337747 PLANT 28-SEP-1999 0420067 A1-MAJ 1 N 28-SEP-1999

Perm	it Information	
Perm	it Type Permit ID	Status Action Date Final Decision Decision Date Agend
AQ23	PERSCRIBED OR ALTERNATIVE NOX EMISSION (1E01059	APPROV 05-MAR-2002 APPROV 05-MAR-2002 AQ-W
AQ15	GROUP A OPERATING PERMITS	PREAPP 28-SEP-2000 28-SEP-2000 AQ-W
AQ15	GROUP A OPERATING PERMITS	PREAPP 28-SEP-2000 28-SEP-2000 AQ-W
AQ02	NON-MAJOR COMPREHENSIVE PLAN APPLICATI 1X99034	APPROV 26-OCT-1999 APPROV 26-OCT-1999 AQ-W
AQ02	NON-MAJOR COMPREHENSIVE PLAN APPLICATI 1X99033	APPROV 26-OCT-1999 APPROV 26-OCT-1999 AQ-W
W24	SEWER CONNECTION: PLAN APPROVAL FOR TY	APPROV 23-JUN-1999 APPROV 23-JUN-1999 IWW-\
AQ19	CERTIFY ECP / NOX CAP W/O PUBLIC COMMEN 1E99016	APPROV 05-MAY-1999 APPROV 05-MAY-1999 AQ-W
AQ03	MAJOR COMPREHENSIVE PLAN APPLICATION 1X95093	APPROV 22-SEP-1997 APPROV 22-SEP-1997 AQ-WI

Co. a of Mass Department of Environmental . stection

PRE-INSPECTION ACTIVITY REPORT (PREINSACT.RDF Version 3.6 - 03-AUG-2000)

BERKSHIRE POWER LLC

Account Number: 274425

Performed Action History (INSpections, VIOlations, ENForcements, SCReenings, SeLFreporting, CoMPlaints, CORrespondence (except billing and right to know info))

			77					
Program / Region	Activ Cate	<u>ity</u> gory/Type	Activity Description	Date of Activity	Date Closed	Performed By	RoType	Class
DEP-WE	ENF	/NON	NOTICE OF NON-COMPLIANCE	02-APR-2002		M. SIMPSON	DEPF	
AQ-WE	ENF	/NON	NOTICE OF NON-COMPLIANCE	02-APR-2002		M. SIMPSON	PLANT	OP5.5
DEP-WE	SLF	/STACK	STACK TEST REPORT	16-NOV-2001	20-DEC-2001	R. WINEBERG	DEPF	
DEP-WE	SLF	/STACK	STACK TEST REPORT	07-JUN-2001	16-JUL-2001	R. WINEBERG	DEPF	
DEP-WE	INS	/INSA-A	ANNOUNCED INSPECTION RELATED A	19-JUN-2000		R. WINEBERG	DEPF	FC4B
AQ-WE	INS	/STACK	STACK TEST INPSECTION	19-JUN-2000		R. WINEBERG	PLANT	A1-MA

Chemical Use / Production Unit Info (From TUR reporters: N/A denotes non production unit chemic			
Chemical Name	RPT YR	Production Unit Description	
SULFURICACID	1999	BOILER FEEDWATER TREATMENT SYSTEM USED TO PR	
SULFURICACID	1999	FUEL COMBUSTION FOR ENERGY GENERATION	
SODIUM HYDROXIDE	2000	BOILER FEEDWATER TREATMENT SYSTEM USED TO PR	
SULFURICACID	2000	BOILER FEEDWATER TREATMENT SYSTEM USED TO PR	
SULFURICACID	2000	FUEL COMBUSTION FOR ENERGY GENERATION	

Air Quality (SSEIS) Process Line Informati

Note: This data is no longer available in FMF as of 15-SEP-1997

Refer to SSEIS for info on points, stacks, segments, etc.

Annual Compliance Fee Status (ACF Status)

Note: This data is no longer available on this report as of 12-JAN-1998

Refer to BARS and ACF for ACF Status for this Facility

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12/01/01 09:23

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I HEREBY CERTIFY THAT I HAVE RE	EVIEWED THIS AND ALL A	TTACHED DOCU	MENTS AND THAT	THE BEST OF	MY KNOMLEDGE	AND BELIEF,

THE SUBHITTED INFORMATION IS TRUE AND COMPLETE AND THAT THE AMOUNTS AND VALUES IN THESE MEASUREMENTS AND/OR REASONABLE ESTIMATES USING DATA AVAILABLE TO THE PREPARERS OF THESE DOCLMENTS. I AM AMARE THAT THERE ARE SIGNIFICANT PENALTIES FOR MILLEUD OR INTENTIONAL SUBMISSION OF FALSE OR INCOMPLETE INFORMATION

SIGNATURE:

TITLE: GENERAL MANAGER

SÍGNATURE:

4-15-02

PRINT NAME:

EMISSION STATEMENT - PLANT INFORMATION

YEAR OF RECORD: 00

immediately call the Național Response Center (800) 424-8802.

In case of emergency or spill,

AC



COMMONWEALTH OF MASSACHUSETTS DEPAR ENT OF ENVIRONMENTAL PROTEC DIVISION OF HAZARDOUS MATERIALS One Winter Street

Boston, Massachusetts 02108

FOR IN-STATE WASTE OIL ONLY OR IN-STATE VSQG HW/WO

LACTLT LA MAILS

TO GENERATOR

ase print or type. (Form designed for use on elite (12-pitch) typewriter.) UNIFORM HAZARDOUS 1. Generator US EPA ID No. Manifest 2. Page 1 Information in the shaded areas WASTE MANIFEST is not required by Federal law. A. State Manifest Document Number K881759 B. State Gen. ID 5. Transporter 1 Company Name US EPA ID Number C.State Trans. ID CYN DIL CORPORATION MADIDIBI2131013171717 IMA 7. Transporter 2 Company Name US EPA ID Number D. Transporter a Phone (781 341-510B E. State Trans ID 9. Designated Facility Name and Site Address **US EPA ID Number** CYN DIL CORPORATION F. Transporter's Phone (1771 WASHINGTON STREET, P.O. BOX 119 G. State Facility's ID Not Required STOUGHTON, MA 02072 MADD 018 23 013 7 77 H. Facility's Phone | 781 341-5108 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 12. Containers 13. 14. Unit Total Waste No. Type Quantity Wt/Vol PETROLEUM OIL COMBUSTIBLE LIQUID NA 1270 PG III (WASTE OIL) 0|0|1 TITIOON G GENERATOR J. Additional Descriptions for Materials Listed Above (include physical state and hexard code.) Codes for Wastes Listed Above DEXSIL 15. Special Handling Instructions and Additional Information 24 HOUR EMERGENCY SPILL RESPONSE 781-341-5108 D.O.T. EMERGENCY GUIDE NO. 128 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and yoxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I Date Printed/Typed Name RANK Day 0/2 Acknowledgement of Receipt of Materials Date Month Day Year 94100 18. Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Month Day 19. Discrepancy Indication Space

Form Approved OMB No. 2050-0039 EPA Form 8700-22 (Rev. 9-94) Previous editions are obsolete.

ned Nam

20. Facility Owner or perator; Certification of receipt of hazardous materials covered by this manifest except agnoted in Item 19.

Zianatura

--- CEMS Calibration Report --- From 00:00 06/05/02 Through 23:59 06/05/02

Berkshire Power

Da	End	Zero	Calib	ration	 Drift	Spa	n Calib	ration	 Drift
Parameter	Time	Value	Std.	Drift	(%FS)	Value	Std.	Drift	(%FS)
Unit #1 LoNOx Unit #1 HiNOx Unit #1 NH3 Unit #1 CO Unit #1 O2 Unit #1 Opac	7:21 7:21 7:21 7:21 7:21 8:02	-0.0 -0.0 -0.0 0.2 -0.1 -0.1	0.0 0.0 0.0 0.0 0.0	0.0 0.0 0.0 0.2 0.1	0.0 0.0 0.0 0.2	9.2 270.6 12.4 90.8 17.8 45.1	9.3 271.5 12.7 90.7 18.0 44.9	0.1 0.9 0.3 0.1 0.2	1.2 0.3 2.2 0.1

If Instrument Full Scale is 100, Drift and %Drift will always match.



June 29, 2001

DEBP0026 File: 4330

Commonwealth of Massachusetts
Department of Environmental Protection – TURA
One Winter Street
8th Floor
Boston, MA 02108-4747

Attention:

Mr. Walter Hope

TURA Chief

Subject:

Berkshire Power, LLC

TURA Reporting Package

Dear Mr. Hope:

Please find Berkshire Power's TURA Reporting Package containing a Toxic Use Fee Worksheet, a TURA Billing Information Form, a Form S Cover Sheet, Form S's for sulfuric acid and sodium hydroxide, and "State Only" Form R's for sulfuric acid and sodium hydroxide.

If you have any questions or comments, please do not hesitate to contact me at (413) 789-0075.

Sincerety,

Frank Basile

General Manager

FMB:sms

Enclosures

TURA 2000 Reporting Checklist

Please check the boxes before mailing in your 2000 TURA Reporting Package to ensure that the package is complete.

A	Has the Fee Worksheet been completed?
В	TURA Billing Information Form
С	Has the Form S Cover Sheet been SIGNED and DATED ?
D	Have you included a Form S FOR EACH CHEMICAL?
Е	Has the Form R (or the Form A) or "State Only" Form R been signed and dated FOR EACH CHEMICAL ? (Refer to p. 4 for details on the Form A.)
F	If you are filing a Form A, have you entered a production ratio for the chemical in line 1.1? (Refer to p. 4 for information concerning this optional data element.)

When finished, please send this Checklist along with your 2000 TURA Report.

The 2000 TURA reporting instructions, including this checklist, can be downloaded via the Internet. Our direct address is: http://www.state.ma.us/dep/bwp/dhm/tura/

Massachusetts Toxics Use Fee Worksheet

DUE: July 1, 2001 for non-PBT chemicals. Due October 1, 2001 for PBT chemicals if a 90-day extension is requested by July 1, 2001.

Facility Name	BERKSHIRE POWER, LLP	
Site Address	36 MOYLAN LANE	
	AGAWAM, MA 01001-4606	
DEP Facility II	Number*	

The amount of your fee depends on the number of "full time employee equivalents" (2,000 work hours per year) at your facility, and the number of toxic substances for which reporting is required (i.e. the number of Form Ss you submit).

Use the following schedule to determine your fee for the 2000 reporting year.

# Full Time Employee Equivalents ≥ 10 and < 50 ≥ 50 and < 100 ≥ 100 and < 500 ≥ 500	Base Fee \$1,850 \$2,775 \$4,625 \$9,250	Maximum \$5,550 \$7,400 \$14,800 \$31,450	<u>Fee</u>
A. Determine your base fee by referring to the	2nd column above.	LINE A:	\$1,850
B. Enter # of Form Ss you are filing:		LINE B:	2
C. Multiply LINE B by \$1,100.		LINE C:	\$2,200
D. Add LINE A and LINE C.		LINE D:	\$4,050
E. Enter the amount from LINE D or from the of the schedule (Maximum Fee) WHICHE	LINE E:	\$4,050	

Your fee is the amount entered in LINE E. DO NOT SEND YOUR PAYMENT with your reporting package. DEP will send a bill in the amount owed after receipt of your reporting package. Payment is DUE 30 days after your recipt of the billing document.

REPORTING PACKAGES AND FEE WORKSHEETS SHOULD BE SENT WITH A POSTMARK NO LATER THAN JULY 1, 2001 TO:

Department of Environmental Protection -TURA
One Winter Street, 8th Floor
Boston, MA 02108-4747

^{*} You can obtain this number from your address label. If this is your first year filing, please leave blank, and you will be assigned a number.

TURA Billing Information Form – PLEASE PRINT

Please include in your Form S filing ATTN: Christine Murphy, TURA Program

Comment	
Company Name (as indicated on TUR Fee Worksheet)	BERKSHIRE POWER, LLC
Company Legal Name (as known by the MA Dept. of Revenue & Secretary of State)	BERKSHIRE POWER, LLC
Company Site Name	BERKSHIRE POWER, LLC
Company d/b/a (doing business as) Name	BERKSHIRE POWER, LLC
Company is a subsidiary of or owned by	
Chief Financial Officer/Accountant Phone# fax# ✓ check if this is to whom the invoice should be sent.	GENERAL MANAGER FRANK BASILE T (413) 789-0075 F (413) 789-0701
Person responsible for Accounts Payable Phone# Fax# <pre></pre>	OFFICE / ACCOUNTS MANAGER SANDY SZLACHETKA T (413) 789-0075 F (413) 789-0701 ✓ 36 MOYLAN LANE AGAWAM, MA 01001-4606
	36 MOYLAN LANE AGAWAM, MA 01001-4606
Taxpayer Identification Number (Federal Employer Identification Number or FEI)	74-286-2388



Massachusetts Department of Environmental Protection TURA REPORT - COVER SHEET

Toxics Use Reduction Act - Form S Cover Sheet

Sec	ction 1: General Information	
1.1	Facility Name, Address & DEP Facility Identification	Number
	Berkshire Power, LLC	
	36 Moylan Lane Agawam, MA 01001-4606	
	DEP Facility ID =	
1.2	Are you making a trade secret claim for any of the info	ormation submitted in this COVER SHEET and/or Form S(s)?YESX_NO
1.3	If YES, attach a statement substantiating the claim. Is	
1.4	This report is being filed for reporting year: 20 <u>00</u>	
Seci	tion 2: Certification Statement	
2.0	This CED TRICATION OF LOT	
2.0	This CERTIFICATION STATEMENT should be signed	ed after all the forms have been completed.
	I hereby certify that I have reviewed this and all attace information is true and complete and that the amou reasonable estimates using deta available to the prepare intentional submission of talse or incomplete information	ched documents and that, to the best of my knowledge and belief, the submitted ints and values in these documents are accurate based on measurements and/or ers of these documents. I am aware that there are significant penalties for willful or on.
	Many (Man)	Frank Basile
	Authorized Signature	Print Name
	General Manager	6-29-01
	Position/Title	Date
Secti	on 3: Chemicals Previously Reported That Are N	Int Dancard LI TI V
	man'	
3.0	OPTIONAL QUESTION. In this section, you may prove this year. If you substituted a non-listed chemical for a T	vide information on any chemical reported last year that is not subject to reporting IURA chemical, you may identify the substitution, as well.
	The codes to explain why the chemical is not reportable	are: [1] Chemical Below Threshold But > 0 [2] No Chemical Usage in Reporting
3.1		
-	CAS # of Chemical Not Reportable (if applicable)	Chemical Name
	Explanation of Why the Chemical Is Not Reportable. (En	ter Code):
	CAS # of Chemical Substituted for TURA Chemical	Chemical Name
3.2	CAS # of Chemical Substituted for TURA Chemical	Chemical Name
3.2	CAS # of Chemical Not Reportable (if applicable)	Chemical Name
3.2		Chemical Name
3.2	CAS # of Chemical Not Reportable (if applicable)	Chemical Name

Berkshire Po	ower, LLC	Agawam, MA		2000	D 0 0 0							
FACILITY	NAME	TOWN or TURA ID#	ŧ	2000 Reporting Year	Page 2 of 6							
FORM S C	OVER SHEET (conti	inued)										
Section 4:	UNITS at the facility, the	ng of Production Units - AP oduce a product or service and the pen use the production unit number	to report on chemic	in this block, please identify the cal usage in the attached Form S.	PRODUCTION							
	If there is a substantial change in a PRODUCTION UNIT from one reporting year to the next, the PRODUCTION UNIT must be given a new, unique number. Also check of the block saying the Production Unit is new.											
Production Unit #: 001	This Production Unit (Process/Product Combination) is: New											
	Describe the Process: Boiler Feedwater Treatment System Used to Produce Demineralized Water For Power Production Facility.											
	·											
	Describe the Product: Demineralized Water Us	ed in the Power Production Pro	ocess									
•												
	Enter the four-digit SIC Code(s) that best describe(s) the product:											
	4 9 1 1											
	Describe the Unit of Product: Gallons of Demineralized Water (Please specify if the Unit of Product has been changed since the previous reporting year.)											
	PRODUCTION PROCESS STEP INFORMATION FOR THIS PRODUCTION UNIT											
	Enter the production process code(s) to identify the process step(s) that involves a TUR-reportable chemical(s) as an input, given code needs to be listed.)											
	1. H H 0 1	2.	3	4.								
	5.	6.	7.	8								
	List below, the TURA-re process steps identified a put the relevant code(s)	eportable chemicals associated wit above, check the <u>ALL</u> block. If the (from above) next to the chemical	h the production un chemical is assoc	nit. If a chemical is associated with some but not all of the	ith ALL the process steps,							
	Chemical(s)		Production Pr	rocess								
	Sulfuric Acid Chemical Name	1000	X_ALL									
	7664-93-9 CAS#											
	Sodium Hydroxide Chemical Name	e	_X_ALL									
	1310-73-2 CAS#											

CAS#

	Power, LLC	Agawam, MA	2000	D 2 C								
FACILITY	NAME	TOWN or TURA ID#	Reporting Year	Page 3 of								
FORM S	COVER SHEET (cor	atinued)										
Section 4:	Facility-Wide Lists (or activities) used to p UNITS at the facility, t	ing of Production Units - A PRODUCT roduce a product or service and the product hen use the production unit number to report	CTION UNIT is best thought of as the cor or service. In this block, please identify t t on chemical usage in the attached Form	nbination of the process he PRODUCTION S.								
	If there is a substanti UNIT must be given	al change in a PRODUCTION UNIT fi a new, unique number. Also check of	rom one reporting year to the next, th the block saying the Production Unit	e PRODUCTION is new.								
roduction Init #:		rocess/Product Combination) is:	_									
002	Describe the Process: Fuel Combustion for I											
	~											
	Describe the Product: MWhrs of Electricity from Fuel Combustion											
	Enter the four-digit SIC (Code(s) that best describe(s) the product:										
	4 9 1 1											
	Describe the Unit of Prod (Please specify if the Unit											
	PRODUCTION PR	PRODUCTION PROCESS STEP INFORMATION FOR THIS PRODUCTION UNIT										
	Enter the production output or throughput. given code needs to b	process code(s) to identify the process step (See the reporting guidance document for the e listed.)	p(s) that involves a TUR-reportable che he list of production process codes and in	mical(s) as an input, structions on when a								
	1. J J 0	1 2. 3.	4.	1 1 1								
	5.	6. 7.	8									
		List below, the TURA-reportable chemicals associated with the production unit. If a chemical is associated with ALL the process steps identified above, check the ALL block. If the chemical is associated with some but not all of the process steps, put the relevant code(s) (from above) next to the chemical										
	Chemical(s)	Pro	oduction Process	•								
	Sulfuric Acid		X ALL									

Chemical Name 7664-93-9 CAS# Chemical Name CAS# ALL Chemical Name CAS#

Facility Name:	Berkshire Power, LLP	Facility ID#	Agawam
Chemical:	Sulfuric Acid	Reporting Year	2000

Massachusetts Department of Environmental Protection
TURA REPORT - FORM S

	ion I: Fa	cility-Wide Usage of L	isted Chemical					
1.1	7664-	93-9			6.16.1			
***		al Abstract Service (CAS) N	lumber (if applicable)	Sulfuric Acid Applicable) Chemical Identification (from Form R) (All entries for Dioxin will be assumed to be in decimal points may be used)				
1.2		-Wide Usage of Chemical Id Byproduct (item 1.2d) <u>gene</u> ions carefully, however, befo			ount (in DOLD D	G) 0	ible catego s treated o	ory. or recycled. Read t
	1.2a	Manufactured:	437		1.2d Ge	nerated as Byprodu	ict.	18,264
	1.2b	Processed:	NA		1	pped in or as Produ		
	1.2c	Otherwise Used:	35,654			ppod iii di as i iddi		0
	are not i	Chemical was recy	n may use this block to. (i.e.: 4,000 Chercled on site.	niu rigni colu o evolain subs	Mark all the relation in inventory). Chemical was	orm a "materials be casons that apply, consumed or trans	alance."] or indicat	If the two columns te the number of
	N				_Chemical is a c	ompound.		
		Office (explain).						
1.4	OPTION	AL QUESTION: Did anyth	ing non-routine occur	at your facility	e desain a silva			
1.4	OPTION	AL QUESTION: Did anyth	ing non-routine occur	at your facility	y during the repor	ting year which aft	fected the	data reported?
1.4	OPTION Y	AL QUESTION: Did anyth ES X NO If	ing non-routine occur YES, you may use this	at your facility space to com	y during the report	ting year which aft	fected the	data reported?
1.4	OPTION Y	AL QUESTION: Did anyth	ing non-routine occur YES, you may use this	at your facility	y during the report	ting year which aft	fected the	data reported?
1.4	OPTION Y	AL QUESTION: Did anyth	ing non-routine occur	at your facility space to com	y during the report	ting year which aft	fected the	data reported?
	Y	ES _A NO If	YES, you may use this	at your facility	y during the repor	ting year which afi	fected the	data reported?
	Y	AL QUESTION: Did anyth ES X NO If icals Used in Waste Tr	YES, you may use this	at your facility	y during the report	ting year which af	fected the	data reported?
Section	2: Chemi	icals Used in Waste Tr	YES, you may use this	s space to com	ment:		fected the	data reported?
Section	Is this che	icals Used in Waste Transical used to treat waste or	YES, you may use this eatment Units control pollution?	s space to com	ment:	NO	fected the	data reported?
Section	Is this che	icals Used in Waste Transical used to treat waste or inter the quantity of chemical	YES, you may use this eatment Units control pollution? code for the amount u	X sed to treat wa	ment:	NO	fected the	data reported?
Section	Is this che	icals Used in Waste Transical used to treat waste or	YES, you may use this eatment Units control pollution? code for the amount u	X sed to treat wa	ment:	NO	fected the	data reported?
Section 2.1	Is this che If YES, er	icals Used in Waste Transical used to treat waste or other the quantity of chemical AL — You may enter the amount	YES, you may use this eatment Units control pollution? code for the amount upont:	X sed to treat wa	YES aste or control po	NO	fected the	data reported?
Section 2.1	Is this che If YES, er OPTIONA 3: TURA	icals Used in Waste Transical used to treat waste or inter the quantity of chemical AL — You may enter the amount of the amount of the amount of the interest	YES, you may use this eatment Units control pollution? code for the amount upont:	X sed to treat wa	ment:	NO	fected the	data reported?
Section 2.1	Is this che If YES, er	icals Used in Waste Transical used to treat waste or inter the quantity of chemical AL — You may enter the amount of the amount of the amount of the interest	PYES, you may use this eatment Units control pollution? code for the amount upont: Unit #:	X sed to treat wa	YES aste or control po	NO	fected the	data reported?
Section 2.1	Is this che If YES, er OPTIONA 3: TURA	icals Used in Waste Transical used to treat waste or inter the quantity of chemical AL — You may enter the amount of the amount of the amount of the interest	YES, you may use this eatment Units control pollution? code for the amount upont: Unit #:	X sed to treat wa (Enter #)	YES aste or control po	NO No Cover Sheet.)	fected the	data reported?
Section 2.1	Is this che If YES, et OPTIONA 3: TURA 3.1 Base Y 3.2 Quanti	icals Used in Waste Transical used to treat waste or inter the quantity of chemical AL — You may enter the amount of the amount of the amount of the interest	YES, you may use this eatment Units control pollution? code for the amount upont: Unit #: 001	X sed to treat wa (Enter # 1	YES aste or control po	NO Ilution: C Cover Sheet.)	fected the	data reported?
Section 2.1	Is this che If YES, er OPTIONA 3.1 Base Y 3.2 Quanti 3.3 Toxics If there ha	icals Used in Waste Transmical used to treat waste or after the quantity of chemical AL — You may enter the amount of the production and the second of the s	PES, you may use this eatment Units control pollution? code for the amount upont: Unit #: 001 3.5 Code: Prorting year to the cur	X sed to treat wa (Enter # 1) Byproduct Reference in a	YES aste or control po from the Form S eduction Index:	NO No No No No No No No No		
Section	Is this che If YES, er OPTIONA 3.1 Base Y 3.2 Quanti 3.3 Toxics If there ha	icals Used in Waste Transmical used to treat waste or after the quantity of chemical AL — You may enter the amount of the Transmical Code: 1999 ity of Chemical Code: C C Use Reduction Techniques is been a change from one re-	PES, you may use this eatment Units control pollution? code for the amount upont: Unit #: 001 3.5 Code: Prorting year to the cur	X sed to treat wa (Enter # 1) Byproduct Reference in a	YES aste or control po from the Form S eduction Index:	NO No No No No No No No No		
Section	Is this che If YES, er OPTIONA 3.1 Base Y 3.2 Quanti 3.3 Toxics If there ha	icals Used in Waste Transmical used to treat waste or after the quantity of chemical AL — You may enter the amount of the Transmical Code: 1999 ity of Chemical Code: C C Use Reduction Techniques is been a change from one re-	PES, you may use this eatment Units control pollution? code for the amount upont: Unit #: 001 3.5 Code: Prorting year to the cur	X sed to treat wa (Enter # 1) Byproduct Reference in a	YES aste or control po from the Form S eduction Index:	NO No No No No No No No No		
Section 2.1 Section	Is this che If YES, er OPTIONA 3: TURA 3.1 Base Y 3.2 Quanti 3.3 Toxics If there ha alter previous	icals Used in Waste Transmical used to treat waste or after the quantity of chemical AL — You may enter the amount of the Transmical Code: 1999 ity of Chemical Code: C C Use Reduction Techniques is been a change from one re-	YES, you may use this eatment Units control pollution? code for the amount upont: Unit #:	X sed to treat wa (Enter # if Byproduct R if Emissions Re if A	YES aste or control po from the Form S eduction Index: eduction Index: (1) base year, ar scribe the change	NO Hution: \[\bigcup_C \] Cover Sheet.) 99 NA \[\bigcup_A \] ad/or (2) estimating:	g methods	(that significantly

Facility Name:	Berkshire Power, LLP	Facility ID#	Agawam
Chemical:	Sulfuric Acid	Reporting Year	2000
TURA Report on P	roduction Unit #:002	Enter # from the Form S Cover Sh	neet.)
3.1 Base Yea	ar:1999	3.4 Byproduct Reduction Ind	lex: 4
3.2 Quantity	of Chemical Code: A	3.5 Emissions Reduction Ind	
3.3 Toxics U	se Reduction Techniques Code:	NA	
If there has balter previous	een a change from one reporting year to the reported data) for this PRODUCTION	o the current year in a (1) base year N UNIT REPORT, describe the ch	ar, and/or (2) estimating methods (that significantly ange:
OPTIONAL SECTION	: If the BRI or ERI are negative or the	y do not accurately reflect progress	, you may use this section to describe why.
	- •		

Facility Name:	Berkshire Power, LLP	Facility ID#	Agawam	
Chemical:	Sodium Hydroxide	Reporting Year	2000	

Massachusetts Department of Environmental Protection
TURA REPORT - FORM S

	ion 1: Fac	rility-Wide Usage of Li	sted Chemical	*			
1.1	1310-				Sodium F	Hydroxide	
	Chemic	al Abstract Service (CAS) N	lumber (if applicabl	le)	Chemical Id (All entries	lentification (from Form) for Dioxin will be as nts may be used)	R) sumed to be in grams
1.2		Wide Usage of Chemical Id Byproduct (item 1.2d) <u>gene</u> ons carefully, however, befo			mount (in DOLD TO	(1) (1)	tegory. ed or recycled. Read th
	1.2a	Manufactured:	NA		1.2d Ge	nerated as Byproduct:	10.504
	1.2b	Processed:	NA		1	pped in or as Product:	
	1.2c	Otherwise Used:	21,009			PP III ox ab 170ddot.	
	are not in	Chemical was recy	nmay use this block ow. (i.e.: 4,000 Ch	k to evoluin w	hy. Mark all the real to the including the real that the real that in inventory). Chemical was a	orm a "materials balance easons that apply, or ind consumed or transforme	." If the two columns icate the number of
	N.	Chemical was held	in inventory.	INA	Chemical is a c	compound.	•
		Other (explain):					
		•					
1.4	OPTION.	AL QUESTION: Did anyth	ing non-routine occ	ur at your facil	ity during the renor	ting year which affected	the data was at 10
1.4	OPTION.	AL QUESTION: Did anyth	ing non-routine occ	ur at your facil	ity during the repor	ting year which affected	the data reported?
1.4	OPTION.	AL QUESTION: Did anyth	ing non-routine occ	ur at your facil	ity during the repor	ting year which affected	the data reported?
1.4	OPTION.	AL QUESTION: Did anyth	ing non-routine occ YES, you may use t	ur at your facil	ity during the repor	ting year which affected	the data reported?
	Y	ES _A_NOH	YES, you may use t	ur at your facil	ity during the repor mment:	ting year which affected	the data reported?
	Y	AL QUESTION: Did anyth ES X NO If Cals Used in Waste Tra	YES, you may use t	ur at your facil	ity during the repor	ting year which affected	the data reported?
Section	2: Chemi	icals Used in Waste Tr	YES, you may use t	this space to co	mment:		the data reported?
Section	Is this che	icals Used in Waste Tra	YES, you may use to eatment Units control pollution?	this space to co	mment:	NO	the data reported?
Section	Is this che	icals Used in Waste Transical used to treat waste or other the quantity of chemical	YES, you may use the eatment Units control pollution?	this space to co	mment:	NO	the data reported?
Section	Is this che If YES, er	icals Used in Waste Transical used to treat waste or other the quantity of chemical L.—You may enter the arms	eatment Units control pollution? code for the amoun	this space to co	mment:	NO	the data reported?
Section	Is this che If YES, er	icals Used in Waste Transical used to treat waste or other the quantity of chemical	eatment Units control pollution? code for the amoun	this space to co	YES waste or control pol	NO Ilution: [C]	the data reported?
Section	Is this che If YES, er OPTIONA 3: TURA	icals Used in Waste Transical used to treat waste or other the quantity of chemical L.—You may enter the amount of the production	eatment Units control pollution? code for the amountuint: Unit #: 00	this space to co	YES waste or control pol	NO Ilution: [C] Cover Sheet.)	the data reported?
Section	Is this che If YES, er OPTIONA 3.1 Base Y	icals Used in Waste Transical used to treat waste or atter the quantity of chemical AL — You may enter the amore Report on Production Tear: 2000	YES, you may use the eatment Units control pollution? code for the amount ount: Unit #: 001	at used to treat (Enter: 3.4 Byproduct	YES waste or control pol # from the Form S of	NO Ilution: [C] Cover Sheet.)	the data reported?
Section	Is this che If YES, et OPTIONA 3: TURA 3.1 Base Y 3.2 Quanti	icals Used in Waste Transical used to treat waste or atter the quantity of chemical LL — You may enter the amount of the production and the control of the c	YES, you may use the eatment Units control pollution? code for the amount ount: Unit #: 001	at used to treat (Enter: 3.4 Byproduct 3.5 Emissions	YES waste or control pol	NO Ilution: [C] Cover Sheet.)	the data reported?
Section	Is this che If YES, er OPTIONA 3.1 Base Y 3.2 Quanti 3.3 Toxics	icals Used in Waste Transical used to treat waste or a ter the quantity of chemical L.—You may enter the amount of the result of	YES, you may use the eatment Units control pollution? code for the amount ount: Unit #: 000	this space to co	W YES waste or control pol # from the Form S of Reduction Index: Reduction Index:	NO Ilution: \[C] Cover Sheet.) 0 NA	
Section	Is this che If YES, er OPTIONA 3.1 Base Y 3.2 Quanti 3.3 Toxics If there has	icals Used in Waste Transical used to treat waste or atter the quantity of chemical LL — You may enter the amount of the production and the control of the c	YES, you may use to eatment Units control pollution? code for the amount ount: Unit #: 000	this space to co	W YES waste or control pol # from the Form S (Reduction Index: Reduction Index:	NO Ilution: \[\bigcup C \] Cover Sheet.) ONA	
Section	Is this che If YES, er OPTIONA 3.1 Base Y 3.2 Quanti 3.3 Toxics If there has	icals Used in Waste Transical used to treat waste or after the quantity of chemical AL — You may enter the amount of the enter the ent	YES, you may use to eatment Units control pollution? code for the amount ount: Unit #: 000	this space to co	W YES waste or control pol # from the Form S (Reduction Index: Reduction Index:	NO Ilution: \[\bigcup C \] Cover Sheet.) ONA	
Section 2.1 Section	Is this che If YES, er OPTIONA 3: TURA 3.1 Base Y 3.2 Quanti 3.3 Toxics If there has alter previous	icals Used in Waste Transical used to treat waste or after the quantity of chemical LL — You may enter the amount of the result	eatment Units control pollution? code for the amountuint: Unit #: 001 Code: porting year to the	at used to treat (Enter: 3.4 Byproduct 3.5 Emissions N A Current year in	# from the Form S (Reduction Index: Reduction Index: a (1) base year, and describe the change	NO Illution: \[\bigcup_{\text{\text{\text{C}}}} \] Cover Sheet.) 0 NA \[\bigcup_{\text{\tinte\text{\tin\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\texi{\text{\text{\text{\text{\texi{\text{\text{\texi{\texi\text{\text{\texictex{\texi}\texict{\text{\texit{\texi{\text{\text{\texi\text{\texit{\t	ods (that significantly
Section 2.1 Section	Is this che If YES, er OPTIONA 3.1 Base Y 3.2 Quanti 3.3 Toxics If there has alter previous	icals Used in Waste Transical used to treat waste or after the quantity of chemical AL — You may enter the amount of the enter the ent	YES, you may use to eatment Units control pollution? code for the amount ount: Unit #: 001 Code: porting year to the PRODUCTION UN	at used to treat (Enter: 3.4 Byproduct 3.5 Emissions N A Current year in	# from the Form S (Reduction Index: Reduction Index: a (1) base year, and describe the change	NO Illution: \[\bigcup_{\text{\text{\text{C}}}} \] Cover Sheet.) 0 NA \[\bigcup_{\text{\tinte\text{\tin\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\texi{\text{\text{\text{\text{\texi{\text{\text{\texi{\texi\text{\text{\texictex{\texi}\texict{\text{\texit{\texi{\text{\text{\texi\text{\texit{\t	ods (that significantly

Approval Expires: 01/31/2003

E	EPA United States Environmental Fagency	Protontion S	Section 313 of the diso known as Title	FOF Emergence	v Plai	nning and C	Ommunih	INVEN	CHEMICAL RETORY REPORT	ELEASE	RM
		OMPLETED F	ORMS: 1. EPCRA R P.O Box 3 Merrifield, ATTN: TO	eporting Cent 348 VA 22116-33 XIC CHEMIC	er 48 AL RE	2. APPROPF (See instru	HATE STAT	E OFFICE pendix F)	Enter "X" he is a revision	nly	
-	portant. See	mstructio	PARTI FAC	e when "	Not A	Applicable	(NA)" b	oxes sh	ould be chec	ked.	
SE	CTION 1. REF	PORTING VI	PART I. FAC	ILITYIDI	=NI	IFICATIO	N INFO	RMATIC	N		
			T INFORMATION								
2.1	Are you claiming Yes (Ans Attac	g the toxic chen wer question 2. ch substantiatio	nical identified on page .2; X No (e 2 trade secr Do not answe Go to Section	er 2.2; 3)	. 2.2 (Ar	his copy	"YES" in 2.	Sanitized	Unsanitiz	zęd
info	rmation is true and g data available to	complete and the preparers of		s and that, to values in this	46 - 6 -	-4 5 1 4					
	NK BASILE	o owner/operat	or or senior managem				Sign	ature:	, ()	Date	Signed
		II ITV IDENI	GENERAL MAI	NAGER				Mini	Max	06/29/	/2001
4.1	CTION 4. FAC	ILIIY IDEN	TIFICATION					11 1	10		
	ity or Establishment N	ame				Facility ID Nun					
	SHIRE POWER, LLC	anie			Facili	ity or Establishme	ent Name or N	ailing Addres	s(if different from stre	et address)	
Stree					X 1 10			1.			
36 MC	YLAN LANE				Mailir	ng Address					
City/0	County/State/Zip Code			-	City/S	State/Zip Code	-				
AGAV	/AM	HAMPDEN		MA 01001-4606	Oityro	riate/Zip Code				Country	(Non-US)
4.2	This report conta				An enti	re b.	Part of a facility	с.	A Federal		2000
4.3	Technical Contac		RON RINAOLO				lacility		facility d		(e)
4.4	Public Contact N	ame	RON RINAOLO					Те	13) 789-0075 lephone Number (inc	lude area cod	e)
4.5	SIC Code (s) (4 c	digits)	Primary	1.		· ·		(4*	13) 789-0075	1	
4.0		Degrees	a. 4911 Minutes	b.	de	C.	d.		e.	f.	
4.6	Latitude	42	02	Second 50	ıs	Longitud	е 📙	Degrees	Minutes		onds
4.7	Dun & Bradstreet Number(s) (9 digi		EPA Identification Nu	ımber	4.9	Facility NPDE		072	Jnderground Inject		de
. 80	7560094		(RCRA I.D. No.) (12 o			Number(s) (9	characters)	7.10	UIC) I.D. Number(s) (12 digits))
		b.			a. N b.	^		b. NA			
SEC	Name of Parent C		NY INFORMATIO	N				12.			
5.2	Parent Company		NA X		1						
	- All Sompany	Duit & DIAUSE	reer innimber	NA X							

TRI Facility ID Number

	DADTII CUEN										N	EW FAC	ILITY			
	PART II. CHEN	IICAL-SP	ECIF	FIC	INFO	ORM/	OITA	N			To	oxic Cher	nical, Ca	tegory or	Generic	Name
											SL	ILFURIC AC ILY)				
SE	CTION 1. TOXIC CHEMIC				(lm	portant:	DO N	OT com	plete	this s	ection	if you c	omplete	d Sectio	n 2 belo	w.)
1.1	CAS Number (Important: Ente	r only one nun	nber ex	cactly	as it a	ppears	on the S	Section 3	13 lis	st. Ente	er cate	gory code	e if report	ting a che	emical ca	ategory.
4.0	Toxic Chemical or Chemical C	ategory Name	(Impo	rtant.	Enter	only one		m								
1.2	30LF0RIC ACID - (1994 AN	DAFTER "AC	ID AE	ROSC	DLS" O	NLY)										
1.3	Canaria Chaminal No. (1	ortant: Comple	te only	if Pa	rt 1, Se	ection 2.	1 is che	cked "ye	es", (Generi	c Nam	e must b	e structu	rally des	criptive.)	-
1.4	(if there are any numbers in both be reported in percentages and 1 2 3	Xes 1-17, then) every	field	muet h	a filled i	in mith -	144	or son	-	nber b	etween 0, indicate	.01 and 1 NA.) 14			
NA	X									T		1.5	14	15	16	17
SEC	TION 2. MIXTURE COM	PONENT ID	ENT	TY	(lmp	ortant:	DO NO	T	lata t							
					t Mavie	ortarit,	70 I	comp	iete t	nis se	ction	if you co	mpleted	Section	1 above	∍.)
2.1	Generic Chemical Name Provi	oappiid	or (imp	Ortani	i. waxi	mum of	70 char	acters, i	nclud	ing nu	mbers	, letters, s	spaces, a	and punc	tuation.)	
SEC	CTION 3. ACTIVITIES AND	USES OF	THE	TO	KIC C	HEMIC	CAL A	T THE	FÁC	CILIT	Y					
3.1	(important. Oneck a	ili triat apply.)														
	Manufacture the toxic ch	nemical:	3.2	Pro	cess	the to	xic che	emical:		3.3	Oth	erwise	use the	toxic o	hemica	al:
d e f.	For sale/distribution X As a byproduct As an impurity		a. b. c. d. e.		As a fi As an Repac As an i	impurity	on com	ent		L	X	As a cher As a man Ancillary o	ufacturin	g aid Ise		
SEC	TION 4. MAXIMUM AMOL	JNT OF TH	E TO	XIC	CHE	VICAL	ONSI	TE AT	AN	Y TIN	IE DI	JRING	THE C	ALEND	AR YE	AR
4.1	04 (Enter two-	digit code fr	om ir	stru	ction	packa	ge.)		拉那							
SEC	TION 5. QUANTITY OF TH	HE TOXIC (CHEN	IICA	L EN	TERIN	G EA	CH EN	VIRO	ONM	FNT	V MED	NI M O	NOTE		
			A.	. Tota	l Relea	ase (p	ounds/y	ear*)	B. Ba	asis o	f Estir			om Storn		_
5.1	Fugitive or non-point air emissions	NA x		(Ente	NA NA	e code o	r estima	ate**)	(e	nter co	ode)			10 TO		
5.2	Stack or point air emissions	NA	7		437			+)					
5.3	Discharges to receiving streams water bodies (enter one name pe	or er box)														
	Stream or Water Body Na		BUSCAL	地方的电话	THE RESERVE	425年1月17年		H SEE			10 TO					
.3.1	NA		1			-				-	_			-		
.3.2											-			•	-	
.3.3																
additi	onal pages of Part II, Section 5.	3 are attached	d, indi	cate 1	the tota	al numb	per of p	ages in	this b	рох		1				
u indi	cate the Part II, Section 5.3 pag	je number in	this bo	X.	1			2,3, etc.)			_					1

EPA FORM R PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

ı	TRI Facility ID Number
	NEW FACILITY
	Toxic Chemical, Category or Generic Name
	SULFURIC ACID - (1994 AND AFTER "ACID AEROSOLS"

SECTION	ON E QUANTITY OF	e mines i il mo mines	2710						1 0	ULFURIC ACID - (1994 AN NLY)		
02011	ON 5. QUANTITY OF	THE I	NA			(pour		(enter range	B. Bas	NTAL MEDIUM sis of Estimate liter code)	ONS	ITE (Continue
5.4.1	Underground Injection or to Class I Wells	nsite	х	NA								
5.4.2	Underground Injection or to Class II-V Wells	nsite	х	NA								
5.5	Disposal to land onsite		77.2									
5.5.1A	RCRA Subtitle C landfills		X	NA					安静服料AN			
5.5.1B	Other landfills		X	NA								
5.5.2	Land treatment/application	on	Х	NA								
5.5.3	Surface Impoundment		Х	NA								
5.5.4	Other disposal			0					0			
SECTIO	ON 6. TRANSFERS O	F THE	TOXI	C CHE	MICAL I	N WA	STES TO	O OFF-SIT	FIO	CATIONS		
6.1 DIS	CHARGES TO PUBL	ICLY O	WNE	D TRE/	ATMEN	TWO	PKS (PC	TIMA)	ELU	CATIONS		
6.1.A To	otal Quantity Transferre	=d to PO	TWs	and Bas	is of Es	timate	KING (F.C	/ I VVS)				
6.1.A.1.	Total Transfers (pound	ds/year*)						s of Estima	160			
	(enter range code** or e	stimate)						r code)	lle			
(0						0	110				
6.1.B.1	POTW Name	PRINGFIE	ELD RE	EGIONAL	WWTF						-	
POTW Ad	idress	WO BONE	OI ISLA	AND ROA	D.						-	
City AG	BAWAM				State	MA	County	HAMPDEN	1		Zip	01001~
6.1.B.2	POTW Name	NA										
POTW Add	dress											
City					State		County				Zip	
If addition	nal pages of Part II, Sectio	n 6.1 are	attach	ned, indic	ate the to	otal nur	mber of pa				1	
SECTIO	N 6.2 TRANSFERS T							1 (exan	npie: 1,	2,3, etc.)		
	Off-Site EPA Identification					HON	ŇA					
	cation Name NA	21.11.	0. (JIV(10)	10.)	-	IVA					
Off-Site Add	dress											
City		Sta	ate M	A Coun	ity					Zip	Co	ountry
s location ι	under control of reporting fa	acility or pa	arent c	ompany?								on-US)
				,, .						Yes	Х	No

EPA FORM R PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number

NEW FACILITY

Toxic Chemical, Category or Generic Name

SULFURIC ACID - (1994 AND AFTER "ACID AFPOSOLIS"

	. OTILIMICAL-S						1	SULFURIC ACID	- (1994 ANI	gory or Generic Na DAFTER "ACID AEROS		
SECTION	6.2 TRANSFERS	S TO C	THER O	FF-SIT	FLOCAT	IONE (C4:		ONLY)	(10017111	TAI TEN AGID ACROS		
A. Total Trai	nsfers (pounds/yea	ar*)			f Estimate	TONS (Continue	-					
(enter ran	nge code** or estimate	e)		(enter c			C.	Type of Was	te Treatn	nent/Disposal/		
1. NA			1.				Recycling/Energy Recovery (enter code 1.					
2.			2.				2.					
3.			3.				3.					
1.			4.				4.		· · · · · ·			
5.2. <u>2</u> O	off-Site EPA Identific	cation N	lumber (R	CRA ID	No.)		4.					
Off-Site locati		J			140.)	·						
4												
Off-Site Addre	ess.											
City .			State	Cou	inty					Country		
s location	under control of re	enortin						Zip	-	(Non-US)		
A. Total	Transfers (pounds/		y racility o	_				Yes		No		
	range code** or estin	nate)		В	. Basis of Es		C.	Type of Was	ste Treatr	ment/Disposal/		
			1.		(**************************************	7	-	Recycling/E	energy Re	ecovery (enter co		
		ī	2.				1.					
•			3.				2.					
			4.				4.					
ECTION 7	A. ON-SITE WA	STET	REATME	NT ME	ETHODS (AND EFFICIENCY	7.					
						s applied to any						
	Wa	aste stre	am containi	ing the to	oxic chemica	or chemical category.						
eneral /aste Stream	b. Waste T	reatmer	nt Method(s) er code(s)]) Sequer	тсе	c. Range of Influent		Waste Treatr	ment e.	Based on		
enter code)	Įo.i.o.	onaracie	si code(s)]			Concentration		Efficiency Estimate		Operating Data?		
					ALA T				-			
	7A. 1b	1	C11	1 21		7A 4						
7A.1a	7A.1b	1 4	C11	2 5	NA	7A.1c		7A. 1d		7A.1e		
		-	C11	1 F	NA	7A.1c		7A.1d		Yes No		
7 A.1 a	3	4	C11	5	NA .	2		100 %		Yes No		
7 A.1 a	3 6	4 7	C11	5 8	NA		~			Yes No X 7A. 2e		
7 A.1 a	3 6 7A. 2b	7	C11	5 8	NA .	2	~	100 %		Yes No		
7A.1a W 7A.2a	3 6 7A. 2b	4 7 1 4	C11	5 8 2 5	NA	7A.2c	~	100 % 7A. 2d %		Yes No X 7A. 2e Yes No		
7A.1a W 7A.2a	3 6 7A. 2b	4 7 1 4 7	C11	5 8 2 5 8	NA	2	~	100 %		Yes No X 7A. 2e Yes No 7A. 3e		
7A.1a W 7A.2a	3 6 7A. 2b 3 6 7A. 3b	4 7 1 4 7 1	C11	5 8 2 5 8 2	NA	7A.2c	~	100 % 7A. 2d %		Yes No X 7A. 2e Yes No		
7A.1a W 7A.2a 7A.3a	3 6 7A. 2b 3 6 7A. 3b 3	4 7 1 4 7	C11	5 8 2 5 8 2 5	NA	7A.2c	~	100 % 7A. 2d % 7A. 3d %		Yes No X 7A. 2e Yes No 7A. 3e Yes No		
7A.1a W 7A.2a ′A.3a	3 6 7A. 2b 3 6 7A. 3b 3 6	4 7 1 4 7 1 4 7 7	C11	5 8 2 5 8 2 5 8	NA	7A.3c		100 % 7A. 2d % 7A. 3d		Yes No X 7A. 2e Yes No 7A. 3e Yes No 7A. 4e		
7A.1a W 7A.2a ′A.3a	3 6 7A. 2b 3 6 7A. 3b 3 6 7A. 4b 3 6	4 7 1 4 7 1 1 4 7 1	C11	5 8 2 5 8 2 5 8	NA	7A.3c		100 % 7A. 2d % 7A. 3d %		Yes No X 7A. 2e Yes No 7A. 3e Yes No		
7A.1a W 7A.2a 'A.3a	3 6 7A. 2b 3 6 7A. 3b 3 6 7A. 4b 3	4 7 1 4 7 1 4 7 1 4 4 7	C11	5 8 2 5 8 2 5 8 2 5	NA	7A. 3c		100 % 7A. 2d % 7A. 3d % 7A. 4d		Yes No X 7A. 2e Yes No 7A. 3e Yes No 7A. 4e Yes No		
7A.1a	3 6 7A. 2b 3 6 7A. 3b 3 6 7A. 4b 3 6	4 7 1 4 7 1 4 7 7 1 4 7 7 7 1 4 7 7 7 7	C11	5 8 2 5 8 2 5 8 2 5 8	N/A	7A.3c		100 % 7A. 2d % 7A. 3d % 7A. 4d		Yes No X 7A. 2e Yes No 7A. 3e Yes No 7A. 4e		

EPA FORM R

TRI Facility ID Number

	PART II. CHEMICAL-SPI	ECIFIC INFORMAT	TON (CONTINUED	NEW FACILITY	
			(OITHIOLD	Toxic Chemical, Cat	egory or Generic Name
_				SULFURIC ACID - (1994 A	ND AFTER "ACID AEROSOLS" ON
SE	CTION 7B. ON-SITE ENERGY	RECOVERY PROCE	SSES		
X	Not Applicable (NA) - Chec	k here if no on-site energy re	covery is applied to any was	te	
_	strear	m containing the toxic chemic	cal or chemical category.		
1	Energy Recovery Methods [enter 3-c	haracter code(s)]			
'	NA 2	3		4	
SE	CTION 7C. ON-SITE RECYCLI	NG PROCESSES			
X	Not Appliable (NA) Obert I		pplied to any waste		
<u>L</u>	stream c	ontaining the toxic chemical	or chemical category.		
r	Recycling Methods [enter 3-character	code(s)]		·	
1.	NA 2.	3.	4.		
6.	7.				5.
	(.)	8.	9.		10.
SEC	TION 8. SOURCE REDUCTION	ON AND RECYCLING	ACTIVITIES		
		Column A	Column B	Column C	
		Prior Year	Current Reporting Year	Following Year	Column D Second Following Ye
.1	Quantity released ***	(pounds/year*)	(pounds/year*)	(pounds/year*)	(pounds/year*)
.2	Quantity used for energy recovery	2 NA	437	437	437
	onsite	IVA	NA	NA	NA
.3	Quantity used for energy recovery offsite	· NA	. NA	NA ·	NA NA
.4	Quantity recycled onsite				140
5		NA NA	NA	. NA	NA
.6	Quantity recycled offsite	NA	NA	NA	NA
7	Quantity treated onsite	6227	17827	17827	17827
_	Quantity treated offsite	NA	NA	NA	NA
8	Quantity released to the environmen catastrophic events, or one-time eve processes (pounds/year)	t as a result of remedial actio nts not associated with produ	ons, action	0	
0					
9	Production ratio or activity index			0000227.54	
10	Did your facility engage in any source enter "NA" in Section 8.10.1 and ans	e reduction activities for this ower Section 8.11.	chemical during the reporting	year? If not,	
	Source Reduction Activities		thods to Identify Activity (ente	or and a	,
0.1	[enter code(s)]		enter to identify Activity (enter	a codes)	
0.2	NA	a.	b.	c.	
).3		a.	b.	c.	
		a.	b.	C.	
1.4		a.	b.		

EPA Form 9350-1 (Rev. 01/2001) - Previous editions are obsolete.

^{*} For Dioxin or Dioxin-like compounds, report in grams/year

Form Approved OMB Number: 2070-0093

Approval Expires: 01/31/2003

MPORTA	ANT: Type of	print; read	instruc	tions before co
_	EPA	11_		ONLY"
	States			ion 313 of th

FORM R

TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Page 1 of 5

	Environmental Pr agency	otection a	ilso knov	wn as Title	mergency III of the S	y Plar Super	nning and (fund Amer	Comm	nunity l nts and	Right-t I Reau	o-Kr thor	now Act of 19 ization Act	}86 <u>,</u>	
W	HERE TO SEND CO	MPLETED F	ORMS: 1.	P.O Box 33 Merrifield, V	/A 22116-33	48	2. APPROP (See instr	uctions	in App			Enter "X" h is a revision For EPA use of	n	his
lm	portant: See	instructio	ns to c				LEASE INVE			V00.0	ber			
			PART	I. FACI	LITYIDI	ENITI	FICATIO	(14)	() DO	Xes s	not	nd be ched	:Ked.	
SE	CTION 1. REP	ORTING Y	FAR 20	000	LIT IDE	=14 1 1	FICATIO	או אי	FOR	MAII	ON			
	CTION 2. TRAI													
_	Are you claiming				2 trade coo	-40								
2.1	Yes (Answ Attach	er question 2 substantiation	.2; on forms)	X No (E	o not answe to Section	er 2.2; 3)	2.2	this co Answer	only if "	YES" in	2.1)	itized	Un	sanitized
SE	CTION 3. CERT	TIFICATIO	N (Imp	ortant: Re	ad and si	ign at	fter comp	leting	all for	rm sec	ction	ıs)	_	
info	mation is true and commation are true and comments are true and comments are true ar	ve reviewed to complete and he preparers	ne attache that the ar of this rep	d documents nounts and va ort.	and that, to alues in this	the he	-4 - £ 1	1 4		40	_			
	me and official title of	owner/opera	tor or sent						Signat	ure:	1			Date Signe
		ITV IDEA	TITIO 1 T	GENERAL MAN	AGER					Min	4/	Made		06/29/2001
4.1	CTION 4. FACII	LITTIDEN	HEICAT	ION		,				/	/ '			
	lity or Establishment Na	me I					Facility ID No		NEW					
	SHIRE POWER, LLC					Facili	ty or Establish	nent Na	me or Ma	iling Add	ress(if	different from stre	et addr	ess)
Stree	1					Basilia	- 4 11							
36 M	DYLAN LANE					Mann	ng Address		,					
City/0	County/State/Zip Code					Citv/S	state/Zip Code	-			2.11			
AGAV	MAV	HAMPDEN		ř	VIA 01001-4606				J				Co	ountry (Non-US
4.2	This report contai			applicable)	9 1 8 1 .	An enti	re b.	Par faci	t of a	c. [A Federal	d.	GOCO
4.3	Technical Contact	Nama	POND							L	Telor	hone Number (inc		
	- Tommour Contact	. Maille	KONK	INAOLO								789-0075	Jude an	ea code)
4.4	Public Contact Na	me	RON R	INAOLO							Telep	hone Number (inc	clude are	ea code)
1.5	SIC Code (s) (4 di	gits)		rima ry 4911	b.		c.		d.			e.	f.	
1.6	Latitude	Degrees		Minutes	Secon	ds	Langite			egrees		Minutes		Seconds
	Dun & Bradstreet	42	FPA Ide	02 ntification Nu	50		Longitu			072		38		55
80	Number(s) (9 digits	4.8	(RCRA	.D. No.) (12 c	haracters)	4.9	Facility NPD Number(s) (ES Per 9 chara	mit cters)	4.10	Und	lerground Injec C) I.D. Number	tion W	ell Code
80	07560094	a.	NA			a. N	A			a. N		-) I.D. Harribon	(3) (12	digits)
EC	TION 5. PAREN	IT COMPA	NV INC	ODRATION	1	b.				b.				
.1	Name of Parent Co				A	_					-			
-			NA	X		7								
.2	Parent Company's	Dun & Brads	treet Numi	per N	VA X									

5.1	Name of Parent Company	NA	Х			
5.2	Parent Company's Dun & Bradst	treet Nur	nber	NA	X	

TRI Facility ID Number
NEW FACILITY
Toxic Chemical, Category or Generic Name
SODIUM HYDROXIDE

	DADT II OUTIN	EPA FU								NE	W FACI	LITY			
	PART II. CHEMI	CAL-SP	'ECIF	IC IN	FORM	ATIO	4			Тох	dc Chen	nical, Ca	tegory or	Generic	Name
											IUM HYDE			78.40	
SE	CTION 1. TOXIC CHEMICA	AL IDENT	TTY	(1	Important	: DO NO	OT com	plete	this s	ection	if you c	omplete	ed Section	n 2 belo	w.)
1.1	CAS Number (Important: Enter	only one nur	mber ex	actly as i	t appears	on the S	ection 3	13 lis	st. Ente	r categ	ory code	e if repor	ting a che	emical ca	ategory.)
1.2	Toxic Chemical or Chemical Ca	tegory Name	7E												
1.3	Generic Chemical Name (Impor	tant: Comple	ete only	if Part 1,	Section 2	.1 is che	cked "ye	es". (Generi	c Name	must be	e structu	rally desc	criptive.)	
1.4	(If there are any numbers in box be reported in percentages and 1 2 3	ces 1-17, the	n everv	field mus	st he filled	in with a	ithor O o	r son		nber bet ailable, i	tween 0. indicate	.01 and 1 NA.) 14	100. Distr	ribution s	
NA	X											1	10	10	17
SEC	CTION 2. MIXTURE COMP	ONENT II	DENT	TY (ir	nportant:	DO NO	T comp	lete t	this se	ction if	Fyou on		Castian	4 -1	
	Generic Chemical Name Provid				aximum o	f 70 char	ectore i	note :	lina nu	CHOIL II	you co	mpieted	Section	1 above	9.)
2.1	SODIUM HYDROXIDE		(-1	011011111111111111111111111111111111111	MAIIIMIN O	70 Gilai	acters, n	nciuu	ling mu	mbers,	letters, s	spaces, a	and punc	tuation.)	
SEC	CTION 3. ACTIVITIES AND	USES OF	THE	TOXIC	СНЕМІ	CAL A	T THE	FAC	CILIT	Y		-			
3.1	Manufacture the toxic che		3.2	Proce	ss the to	ovio obi			0.0	0.11					
a		nport	J.2	FIUCE	55 1118 10	XIC CHE	emicai:		3.3	Othe	wise	use the	e toxic c	hemica	al:
c d e. f.	For sale/distribution As a byproduct As an impurity		a. [b. [c. [d. [e. [As As Rep	a reactan a formula an article packaging an impurit	tion compone	ent		-	X A	s a man	nufacturin or other ι	use		
SEC	TION 4. MAXIMUM AMOU	NT OF TH	IE TO	XIC CH	EMICA	L ONS	TE AT	AN	Y TIN	IE DU	RING	THE C	ALENE	DAR YE	EAR
4.1	04 (Enter two-d							SE S						非信義	湯油器
SEC	TION 5. QUANTITY OF TH					_	CH EN		ON IN	- NITA	924		(0.74 a)		
			-	. Total Re	elease (p	pounds/y	rear*)	B. B	Basis o	f Estim			om Storr		
5.1	Fugitive or non-point air emissions	NA X	T	NA NA		OI ESHILI	ate")	(0	enter co	oae)	New York			KB2 H	
5.2	Stack or point air emissions	NA x	=	N/A											
5.3	Discharges to receiving streams water bodies (enter one name pe	or er box)													
	Stream or Water Body Nar	ne	ection)		ame aser degree		STATE OF THE STATE	ASSESSED OF THE PARTY OF THE PA	美好用的 的	and the same of th	经验的	CHECK TO		计数数据	2000年
5.3.1	NA						-					7			
5.3.2							-			-				+)	
5.3.3			_				-					-			
	onal pages of Part II. Carting E.														
nd ind	onal pages of Part II, Section 5.3 icate the Part II, Section 5.3 pag	s are attach: e number ir	ed, indi 1 this b	ox. F	total num	iber of p	ages in	this	box		1				

^{*} For Dioxin or Dioxin-like compounds, report in grams/year

EPA FORM R PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

	1 age 3 Of
	TRI Facility ID Number
	NEW FACILITY
	Toxic Chemical, Category or Generic Name
1	SODIUM HYNROWN =

SECTIO	ON 5 OHANTITY)E TUE T	OVIC	OUEW			,			SODIUM	HYDR	OMBE
OLO III	ON 5. QUANTITY (DP THE I	NA			e (poun		enter range	B. Bas	NTAL MEDIU is of Estimate er code)	M ONSI	TE (Continue
5.4.1	Underground Injection to Class I Wells	n onsite	X	NA								
5.4.2	Underground Injection to Class II-V Wells	onsite	X	NA	46							
5.5	Disposal to land onsite	e										
5.5.1A	RCRA Subtitle C land	fills	X	NA			104 (500)					
5.5.1B	Other landfills		х	NA								-
5.5.2	Land treatment/application	ation	X	NA					~ "			
5.5.3	Surface Impoundment		X	NA				-				
5.5.4	Other disposal			0					0	-		
SECTIO	ON 6. TRANSFERS	OF THE	TOX	C CHE	VIICAL	IN WA	STES TO	OFF.SI	TELO	CATIONS	_	
6.1 DIS	CHARGES TO PU	BLICLY	OWNE	D TRF	ATMEN	TWO	PKS /PC	TWo):	I E LO	CATIONS		
	tal Quantity Transfe							(TVVS)		:		
	Total Transfers (por							of Estima	nto		-+	
	(enter range code** c					0.1		r code)	ate			
(0						0			-		
6.1.B.1	POTW Name	SPRINGF	IELD R	EGIONAL	. WWTF							
POTW Ad	Idress	TWO BON	IDI ISL	AND ROA	AD.	-		_				
City AG	AWAM				State	MA	County	HAMPDEN	4		Zip	01001-
6.1.B.2	POTW Name	MA										01001
POTW Add	dress									-		
City					State		County				Zip	
If addition	al pages of Part II, Sec											
	N 6.2 TRANSFERS							1 (exa	mple: 1,	2,3, etc.)		
	Off-Site EPA Identific					TION	NA NA	· .				
	cation Name NA		(11		10./		INA	-				
Off-Site Ad	dress							-				
City		s	State N	AA Cour	nty					Zip	Co	ountry
s location	under control of reportin	a facility see	narc=t	-								on-US)
	control of lebottin	g racinty of	parent	company	·					Yes	Х	No

		ED.	A EODI	W.D.				TRI Facility ID N	Number
			A FOR	"				NEW FACILITY	
PART II.	CHEMICAL-S	PECIF	IC INF	ORM	ATION (CONTINUED)		Toxic Chemical,	Category or Generic Name
						,		SODIUM HYDROXID	
SECTION (6.2 TRANSFERS	TOOT	HER OF	F-SIT	E LOCATIO	ONS (Continued)	,		
A. Total Trans					Estimate	one (continued)	-	Type of Weets	Treatment/Disposal/
(enter rang	ge code** or estimate)		enter co					reatment/bisposal/ rgy Recovery (enter code)
1. NA			1.				1.		gy recovery (enter code)
2.			2.				2.		
3.			3.				-		
4.			4.			· · · · · · · · · · · · · · · · · · ·	3.		
F 2 2 OF	f City EDA Islands						4.		
	f-Site EPA Identific	ation Nu	mber (RC	RAID	No.)				
Off-Site location	on Name								
Off-Site Addre				-			_		
Oil-Site Addre	SS								
City			State	Cou	nty			Zip	Country
Is location u	inder control of re	Poorting	facility o	r narei	at company	12			(Non-US)
A. Total T			laointy of		Basis of Est			Yes	No
	range code** or estin	nate)		Ь,	(enter code)	timate	C,		Treatment/Disposal/ ergy Recovery (enter code)
1.			1,		,		4	recycling/Life	ergy Recovery (enter code)
2.			2.				1.		
3.			3.				2.		
4.		-	4.	_			3.		
SECTION 7	A ON SITE MA	OTE TO		tre nae	THORA		4.	*	
OLO HON /						ND EFFICIENCY			
Not /	Applicable (NA) -	neck nere este strear	If no on-sit	e waste	treatment is	applied to any or chemical category.	,		
a. General	b. Waste 7	reatment	Method(s)	Sequer	nce	c. Range of Influent	14	Waste Treatme	mt. Daniel
Waste Stream		-character		OOQUOI	100	Concentration	a.	Efficiency	e. Based on Operating Data?
(enter code)								Estimate	
7A.1a	7A. 1b	1	C11	2	NA	7A.1c		7A. 1d	7A.1e
W	3	4		5					Yes No
	6	7		8		2		100 %	X
7A.2a	7A. 2b	1		2		7A. 2c		7A. 2d	7A. 2e
	3	4		5					Yes No
	6	7		8				%	
7A.3a	7A. 3b	1		2		7A.3c	+	7A. 3d	74.0
	3	4		5		77.30	+	/A. 30	7A.3e
	6	7		8				%	Yes No
7A.4a	7A. 4b	1	-	2			+		
	3	-		-		7A.4c	+	7A. 4d	7A.4e
	6	4		5				%	Yes No
70 5-	7A. 5b	7		8				79.	
7A.5a		1		2		7A.5c		7A. 5d	7A.5e
	3	4		5				9/	Yes No
E a deliti	6	7		8				%	
n additional page	es of Part II, Section	6.2/7A ar	e attached	d, indic		number of pages in th	is bo	x 1	,
midicate tile	Part II, Section 6.2/7	A page n	umper in t	nis box	c: 1	(example: 1,2,3, etc)			

EPA FORM R

TRI Facility ID Number

P	ARTII. CHEMICAL-SPEC	IFIC INFORMAT	ION (CONTINUI	וח=	NEW FACILITY			
					Toxic Chemical, C	Category o	or Generic Name	
					SODIUM HYDROXIDE			
SEC	TION 7B. ON-SITE ENERGY R	ECOVERY PROCES	SSES					
X	Not Applicable (NA) - Check he	ere if no on-site energy re	covery is applied to any	waste				
		ontaining the toxic chemic	cal or chemical category.					
	Energy Recovery Methods [enter 3-chara	acter code(s)]						
	VA 2	3			4 .			
SEC	TION 7C. ON-SITE RECYCLING	PROCESSES	1					
Х	Not Applicable (NA) - Check here stream cont	if no on-site recycling is a aining the toxic chemical						
	Recycling Methods [enter 3-character co							
1.	NA 2.	3.		4.		5.		
6.	7.	8.		э.		10.	· · · · · · · · · · · · · · · · · · ·	
SEC	TION 8. SOURCE REDUCTION	AND RECYCLING	ACTIVITIES			-		
		Column A Prior Year	Column B Current Reporting Ye	ar	Column C Following Year	S	Column D Second Following Year	
8.1	Quantity released ***	(pounds/year*)	(pounds/year*)	-	(pounds/year*)		(pounds/year*)	
8.2	Quantity used for energy recovery	NA NA	0 NA	+	0		0	
	onsite		IAW		NA		NA	
8.3	Quantity used for energy recovery offsite	NA	NA		NA		NA	
8.4	Quantity recycled onsite	NA	NA		NA		NA	
8.5	Quantity recycled offsite	NA	NA		NA	-	NA	
8.6	Quantity treated onsite	4200	10500	+	10500	10500		
8.7	Quantity treated offsite	NA	NA	+	NA		NA	
8.8	Quantity released to the environment at catastrophic events, or one-time events processes (pounds/year)	s a result of remedial actions not associated with produced	ons, uction	()			
8.9	Production ratio or activity index			1	0000227.54			
8.10	Did your facility engage in any source re enter "NA" in Section 8.10.1 and answe	eduction activities for this or Section 8.11.	chemical during the repo					
	Source Reduction Activities [enter code(s)]	Me	thods to Identify Activity	(enter	codes)			
.10.1	NA	a.	b.	-	c.			
.10.2		a.	b.		c.		-	
.10.3		a.	b.		c.			
.10.4		a.	b.		C.			
8.11	Is additional information on source reducincluded with this report? (Check one b	ction, recycling, or pollutio	n control activities			YES	NO	

4447



SPRINGFIELD WATER AND SEWER COMMISSION

RECEIVED OCT 2 7 1999

Post Office Box 995 Springfield, Massachusetts 01101-0995

413 787-6256 FAX 413 787-6269

October 26, 1999

Mr. Frank Basile General Manager Berkshire Power, L.L.C. 36 Moylan Lane Agawam, MA 01001

Re: Issuance of Industrial Wastewater Discharge Permit

Dear Industrial User:

The Springfield Water and Sewer Commission is authorized to enforce the Pretreatment Program required under Clean Water Act of 1977 (Pub. L. 95-217), the Federal Water Pollution Control Act (Pub. L. 92-500), the Water Quality Act of 1987 (Pub. L. 100-4), and the Code of Federal Regulations, Title 40, Part 403.8, through Massachusetts General Law Chapter 392 of the Acts of 1985 (as amended), the Commission's Sewer Use Regulation, and the intermunicipal treatment agreements with municipalities that discharge to the Springfield Water and Sewer Commission's Regional Wastewater Treatment Facility.

Enclosed is a copy of your company's Industrial Wastewater Discharge Permit (IWDP #24200) which is your legal authorization to discharge to the Springfield Water and Sewer Commission's Regional Wastewater Treatment Facility in accordance with the listed limitations and conditions. Your company's IWDP was developed using information supplied from the IWDP application. Please review your IWDP and inform the Industrial Pretreatment Program of any recent changes which affect your company's IWDP. If necessary, revisions to the IWDP can be made.

The Industrial Pretreatment Program (IPP) is delegated by the U. S. Environmental Protection Agency to protect the wastewater treatment system from the effects of industrial wastewater by regulating industrial wastewater sources and federally regulated categorical industrial processes. The IPP is supported through permit fees paid by the regulated industrial users of the wastewater treatment system. All costs associated with the IPP are shared totally by the industries on a proportional share basis. Each permitted industry will be billed on a yearly basis for its share of the IPP's annual budget.

The issuance of your IWDP confirms the unending, long term environmental commitment between each regulated industry and the IPP. Please contact me at (413) 787-7860 if you have any questions or if you wish to schedule a meeting to discuss your IWDP.

Sincerely,

Springfield Water and Sewer Commission

Robert Weaver

Industrial Pretreatment Manager

enclosure

cc: J. Lyons, Executive Director

D. Borgatti, Operations Director